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APR 19 2005

Attorney Docket No.: 6448.200-US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Simesen et al.

Serial No.: 10/664,775

Group Art Unit: 1653

Filed: September 17, 2003

Examiner: Desai, Anand U.

For: METHOD FOR MAKING RECOMBINANT PROTEINS

CERTIFICATE OF FACSIMILE TRANSMISSION
703-872-9306

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

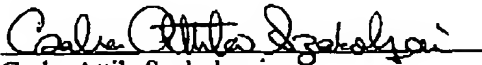
I hereby certify that the attached correspondence comprising:

1. Supplemental Declaration and Power of Attorney Transmittal Letter
3. Supplemental Declaration and Power of Attorney (3 pages)

was sent to the United States Patent and Trademark Office by telefax to the attention of Examiner Desai, Anand U., fax number (703) 872-9306.

Respectfully submitted,

Date: April 19, 2005


Csaba Attila Szakoleczai
Novo Nordisk® Inc.
Customer Number 23650
(609) 987-5800

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SUPPLEMENTAL DECLARATION AND POWER OF ATTORNEY

Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

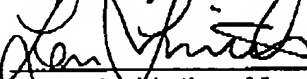
Sir:

In response to the defects in the original Declaration and Power of Attorney as noted in the Office Action of December 10, 2004, Applicants herein submit a Supplemental Declaration and Power of Attorney

The Examiner is hereby invited to contact the undersigned by telephone if there are any questions concerning this Supplemental Declaration and Power of Attorney.

Date: April 19, 2005

Respectfully submitted,



Len S. Smith, Reg. No. 43,139
Novo Nordisk® Inc.
Customer Number 23650
(609) 987-5800

Use the following customer number for all correspondence regarding this application.

23650

PATENT TRADEMARK OFFICE

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)Attorney's Docket Number:
6448.200-US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR MAKING RECOMBINANT PROTEINS

The specification of which (check only one item below):

☐ is attached hereto☒ was filed as United States applicationApplication No. 10/664,775on September 17, 2003

and was amended

on _____

☐ was filed as PCT international application

Number _____

on _____

and was amended under PCT Article 19

on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

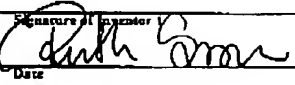
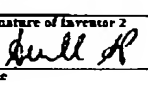

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicated "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Denmark	PA 2002 01384	20 September 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.	60/416,566	07 October 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)				Attorney's Docket Number: 6448.200-US	
I hereby claim the benefit under Title 35, United States Code 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		Patented	Pending	Abandoned
PCT APPLICATIONS DESIGNATING THE U.S.					
APPLICATION NO.	FILING DATE	US SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Reza Green, Reg. No. 38,475; Richard W. Bork, Reg. No. 36,459; Marc A. Egan, Reg. No. 48,829; Rosemarie R. Wilk-Orescan, Reg. No. 45,220; Len S. Smith, Reg. No. 43,139					
Send Correspondence to: Reza Green, Esq. Novo Nordisk Pharmaceuticals, Inc. 100 College Road West Princeton, NJ 0840				Direct Telephone Calls To: Reza Green (609) 987-5800	
1	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
2	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
3	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
4	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)				Attorney's Docket Number: 6448.200-US
5	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
		Lindevangen 61	DK-2830 Virum	Denmark
6	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
7	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
8	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
9	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
		
Date	Date	Date
14 Oct. 2004	08 Oct. 2004	18 Oct. 2004
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6
Date	Date	Date
Signature of Inventor 7	Signature of Inventor 8	Signature of Inventor 9
Date	Date	Date

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)				Attorney's Docket Number: 6448.200-US
5	Full Name of Inventor	Family Name Weilguny	First Given Name Dietmar	Second Given Name
	Residence & Citizenship	City Virum	State or Foreign Country Denmark	Country of Citizenship Denmark
	Post Office Address	Post Office Address Lindevangen 61	City DK-2830 Virum	State & Zip Code/Country Denmark
6	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
7	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
8	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
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Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Date	Date	Date
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6
Date 20/10-2004	Date	Date
Signature of Inventor 7	Signature of Inventor 8	Signature of Inventor 9
Date	Date	Date

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)					Attorney's Docket Number: 6448.200-US
5	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
		Wellguny	Dietmar		
		Virum	Denmark	Denmark	
		Lindevangen 61	DK-2830 Virum	Denmark	
6	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship	
	Post Office Address	Post Office Address	City	State & Zip Code/Country	
7	Full Name of Inventor	Family Name	First Given Name	Second Given Name	
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Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Date	Date	Date
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6
Date	Date	Date
Signature of Inventor 7	Signature of Inventor 8	Signature of Inventor 9
Date	Date	Date